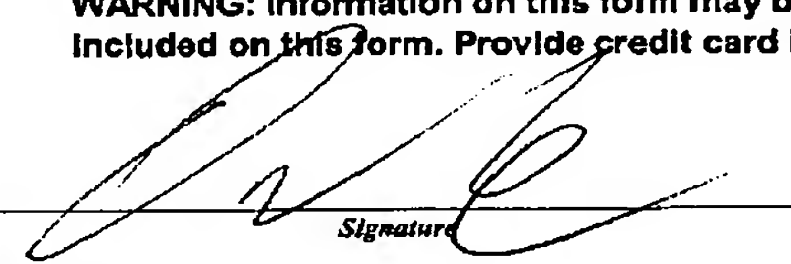


AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. POU920030099US1 (IB1-0063)									
Applicant(s): DANIEL J. BARUS ET AL													
Application No. 10/668,488	Filing Date 9/23/2003	Examiner D. P. Le	Customer No. 46429	Group Art Unit 2819	Confirmation No. 2275								
Invention: METHOD AND SYSTEM FOR PROVIDING BIDIRECTIONAL ASYNCHRONOUS COMMUNICATION													
<u>COMMISSIONER FOR PATENTS:</u>			RECEIVED CENTRAL FAX CENTER OCT 28 2004										
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.													
CLAIMS AS AMENDED													
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE								
TOTAL CLAIMS	8 -	20 =	0 x	\$18.00	\$0.00								
INDEP. CLAIMS	2 -	3 =	0 x	\$88.00	\$0.00								
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00								
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00								
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0463</p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>													
 _____ Signature			Dated: October 28, 2004										
David A. Fox Registration No. 38,807 CANTOR COLBURN LLP 55 Griffin Road South Bloomfield, CT 06002 Telephone (860) 286-2929 Facsimile (860) 286-0115 Customer No. 46429			<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____.</td></tr><tr><td colspan="2" style="text-align: center;">(Date)</td></tr><tr><td colspan="2" style="text-align: center;">Signature of Person Mailing Correspondence</td></tr><tr><td colspan="2" style="text-align: center;">Typed or Printed Name of Person Mailing Correspondence</td></tr></table>			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____.		(Date)		Signature of Person Mailing Correspondence		Typed or Printed Name of Person Mailing Correspondence	
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CC:													

P11LARGE/REV08

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: DANIEL J. BARUS ET AL

) Group Art Unit
) 2819

SERIAL NUMBER: 10/668,488

) Examiner:
) D. P. Le

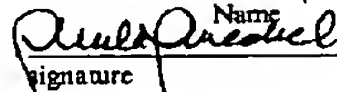
FILED: September 23, 2003

FOR: METHOD AND SYSTEM FOR
PROVIDING BIDIRECTIONAL
ASYNCHRONOUS COMMUNICATIONRECEIVED
CENTRAL FAX CENTER

OCT 28 2004

I hereby certify that this correspondence is
being transmitted to the United States Patent
& Trademark Office via facsimile to facsimile
Number 703-872-9306 on October 28, 2004

Sheila Smedick

 Name
signature date 10-28-04Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**RESPONSE TO OFFICE ACTION**

In response to the Office Action mailed September 21, 2004, Applicants request entry of the following amendments and remarks.